

## PCCD Egrants Electronic Signature Access Request Form

Grant applicants must use this form to either:

- 1) Request electronic signature access within PCCD's Egrants system **OR**
- 2) Delegate electronic signature authority to another person within the applicant's organization.

**Legal Name of Organization:** \_\_\_\_\_

Name of person requesting electronic signature access:	
Title:	
Email Address:	
Telephone Number:	

Please check only **ONE** option below:

**OPTION 1:** I am the organization's Chief Executive Officer and/or I have authority to sign grant contracts on behalf of the organization identified on this form above.

Under penalty of perjury, I swear and affirm that I have the authority to sign documents, including grant contracts, on behalf of the organization identified on this form.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**OPTION 2: Delegation of Signature Authority**

Authority has been delegated to me by completion of the form below.

Chief Executive or responsible organization official:	
Title:	
Email Address:	
Telephone Number:	

Under penalty of perjury, I swear and affirm that I am an official of the organization identified on this form and am authorized by the organization to delegate the authority to sign documents on behalf of the identified organization. I hereby delegate authority to the person identified above as requesting electronic signature access to electronically sign all PCCD grant contracts and any related documents requiring signature for the identified organization.

\_\_\_\_\_  
Signature of Chief Executive Officer or Responsible Official

\_\_\_\_\_  
Date